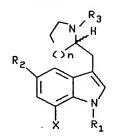
I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Hon. Commissioner of Patents and Trademarks, Washington, D.C. 20231, on this Washington, D.C. 20231, on this \_\_ day of , 1995. By (Signature of person mailing) Grover F. Fuller Jr. (Typed or printed name of person) **PATENT** PC7851G IN THE UNITED STATES PATENT AND TRADEMARK OFFICE IN RE APPLICATION OF: JOHN EUGENE MACOR, ET AL. Examiner: NOT ASSIGNED SERIAL NO.: 08/466,644 FILED: JUNE 6, 1995 Art Unit: NOT ASSIGNED FOR: INDOLE DERIVATIVES Hon. Commissioner of Patents and Trademarks Washington, D.C. 20231 Sir: PRELIMINARY AMENDMENT Please amend the above-identified application prior to examination as follows: IN THE QLAIMS

cancel claims 11, 12, and 17 to 33, without prejudice.

(amended) A compound of the formula



wherein n is 0, 1, or 2; X is hydrogen, chlorine, bromine, or iodine; R<sub>1</sub> is hydrogen; R<sub>2</sub> is selected from hydrogen,

huc 0500 4-27-95



12/18/95

PATENT PC7851G AMENDMENT

THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: : Examiner: Not yet

JOHN EUGENE MACOR, ET AL. assigned

SERIAL NO.: 08/466,644 :

Art Unit: Not yet

FILED: JUNE 6, 1995 : assigned

FOR: INDOLE DERIVATIVES :

Hon. Commissioner of Patents and Trademarks Washington, D.C. 20231

sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

## CLAIMS AS AMENDED

(1)	(2) (3) Claims Remaining After Amendment	(4) Highest Number Previously Paid for	(5) Present Extra	(6)	Addl. <u>Fee</u>
Total Claims	18*minus	33**	<b>=</b>	X\$22.00	0
Independent Claims	-	6** ependent Claim	ı(s) Fee (	•	0 0
*	If the entry in column 2 is less than the entry in column 4, write "0" in column 5.				
**	If the "Highest No. Previously Paid for" is less than 20, write "20" in this space.				
***	If the "High	est No. Previo	usly Paid	l for" is	less

than 3, write "3" in this space.

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- A Petition for Extension of Time for responding within two (2) months of the response date is also enclosed.
- No additional fee is required. [X]
- Please charge Deposit Account No. 16-1445 in the amount of . Two copies of this sheet are enclosed.
- The Commissioner is hereby authorized to charge any [X] additional fees which may be required under 37 C.F.R. 1.16 and 1.17, or credit any overpayment, to Deposit Account No. 16-1445. Two copies of this sheet are enclosed.

Respectfully submitted,

Grover F. Fuller Jr. Attorney for Applicant(s) Reg. No. 31,760

Pfizer Inc. Patent Department, 20th Floor 235 East 42nd Street New York, NY 10017-5755 (212) 573-**1390** 

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